

FEE CALCULATION FORM
(FOR USE WITH FORM P. 15)

APPLICANT'S

09/637-456
637-456

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
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50						
TOTAL IND.	2		3			
TOTAL DEP.	//		10			
TOTAL CLAIMS	12		13			

	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

PTO-1280 (2-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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